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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/716,241	
	Filing Date	11/18/2003	
	First Named Inventor	Timmons	
	Art Unit	1755	
	Examiner Name	Marcantoni	
Total Number of Pages in This Submission	52	Attorney Docket Number	RESINC-0004-US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request - 3 Months	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	1. Chinese Patent & English Translation;
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	2. PTO/SB/08A;
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks The Commissioner is hereby authorized to charge any additional fees or credit any overpayments to Deposit Account No. 50-0997 (RESINC-0004-US), maintained by PAULA D. MORRIS & ASSOCIATES, P.C.	3. Cert. of Mail under 37 CFR 1.10; and
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		4. Return Receipt Postcard
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	SCOTT D. COMPTON, REG. NO. 56,097	
Signature		
Date	February 15, 2005	

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	
Signature	Please see attached certificate of mailing under 37 CFR 1.10

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEB 2005

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$510.00

Complete if Known

Application Number	10/716,241
Filing Date	11/18/2003
First Named Inventor	Timmons
Examiner Name	Marcantoni
Art Unit	1755
Attorney Docket No.	RESINC-0004-US

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-0997 (RESINC-0004-US) Deposit Account Name: Paula Morris & Associates

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	790	395	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

0 - 20 or HP = 0 x 0 = 0

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

0 - 3 or HP = 0 x 0 = 0

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

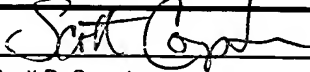
Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

0 - 100 = 0 / 50 = 0 (round up to a whole number) x 0 = 0

4. OTHER FEE(S)Non-English Specification, \$130 fee (no small entity discount) **Fees Paid (\$)**

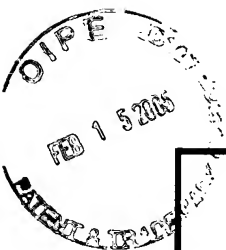
Other (e.g., late filing surcharge): Petition for Extension of Time (3 Months) \$510.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 56,097	Telephone 713.334.5151
Name (Print/Type)	Scott D. Compton	Date	2-15-2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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TRANSMITTAL (1 page); FEE TRANSMITTAL (1 page); RESPONSE TO 1st OFFICE ACTION (34 pages); SUPPLEMENTAL IDS (1 page); FORM PTO/SB08A (1 page); CHINESE PATENT REF. & ENGLISH TRANSLATION (12 pages); PETITION FOR EXTENSION OF TIME - 3 MONTHS (1 page); CREDIT CARD PAYMENT FORM (1 page); and return receipt postcard.

Applicant: SCOTT F. TIMMONS

Group Art Unit: 1755

Serial No.: 10/716,241

Examiner: Marcantoni

Filing Date: 11/18/2003

Atty. Docket No.: RESINC-0004

Title: CEMENTITIOUS COMPOSITION